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PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

First Named Inventor

Norman James Moore

COMPLETE IF KNOWN

Application Number

09 / 397,110

Filing Date

Sept. 16, 1999

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PROCESS AND MATERIALS FOR THE RAPID DETECTION OF STREPTOCOCCUS PNEUMONIAE EMPLOYING PURIFIED ANTIGEN-SPECIFIC ANTIBODIES

the specification of which

(Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 09/16/1999 as United States Application Number or PCT International

Application Number 09/397,110 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached heret . |
|-----------------------|--------------------------|--|
| | | |

[Page 1 of 2]

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| U.S. Parent Application or PCT Parent Number | Parent Filing Date (MM/DD/YYYY) | Parent Patent Number (if applicable) |
|--|---------------------------------|--------------------------------------|
| 09/156,486 | 09/18/1998 | |

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| Name | Registration Number | Name | Registration Number |
|------------------|---------------------|------|---------------------|
| Mary Helen Sears | 19,961 | | |

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

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OR ☒ Correspondence address below

| | | | | | |
|---------|-----------------------------------|-----------|----------------|-----|----------------|
| Name | The M.H. Sears Law Firm Chartered | | | | |
| Address | 910 Seventeenth Street, N.W. | | | | |
| Address | Suite 800 | | | | |
| City | Washington | State | DC | ZIP | 20006 |
| Country | U.S.A. | Telephone | (202) 463-3892 | Fax | (202) 463-4852 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

| | | | | | | | |
|--|---------------------------|------------------------|-------|----------|--------|-------------|--------|
| Given Name (first and middle (if any)) | | Family Name or Surname | | | | | |
| Norman James | | Moore | | | | | |
| Inventor's Signature | <i>Norman James Moore</i> | | Date | 11/16/98 | | | |
| Residence : City | North Berwick | State | Maine | Country | U.S.A. | Citizenship | U.S. |
| Post Office Address | 10-1 Nowell Street | | | | | | |
| Post Office Address | | | | | | | |
| City | North Berwick | State | Maine | ZIP | 03906 | Country | U.S.A. |

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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| | | |
|---|-------------------------------|--------------------|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | Attorney Docket Number | |
| | 2nd. Named Inventor | Mary Kathleen Fent |
| | COMPLETE IF KNOWN | |
| | Application Number | 09 / 397,110 |
| | Filing Date | Sept. 16, 1999 |
| | Group Art Unit | |
| | Examiner Name | |

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☒ Registered practitioner(s) name/registration number listed below

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Name of Second Inventor: ☐ A petition has been filed for this unsigned inventor

| Given Name (first and middle (if any)) | Family Name or Surname |
|--|------------------------|
| Mary Kathleen | Fent |

| | | | |
|----------------------|---------------------------|------|-----------|
| Inventor's Signature | <i>Mary Kathleen Fent</i> | Date | 16 Nov 99 |
|----------------------|---------------------------|------|-----------|

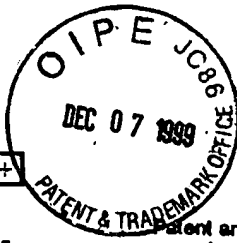
| | | | | | | | |
|-----------------|-------------------|-------|-------|---------|--------|-------------|------|
| Residence: City | Cumberland Center | State | Maine | Country | U.S.A. | Citizenship | U.S. |
|-----------------|-------------------|-------|-------|---------|--------|-------------|------|

| | | | | | |
|--------------------|-------------------|--|--|--|--|
| P st Offic Address | 32 Farwell Avenue | | | | |
|--------------------|-------------------|--|--|--|--|

| | | | | | |
|---------------------|--|--|--|--|--|
| Post Office Address | | | | | |
|---------------------|--|--|--|--|--|

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|------|-------------------|-------|-------|-----|-------|---------|--------|
| City | Cumberland Center | State | Maine | ZIP | 04021 | Country | U.S.A. |
|------|-------------------|-------|-------|-----|-------|---------|--------|

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number

3rd Named Inventor

Vladimir Andrei Koulchin

COMPLETE IF KNOWN

Application Number

09/397,110

Filing Date

Sept. 16, 1999

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

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| | | | | YES | NO |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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[Page 1 of 2]

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| Name | Registration Number | Name | Registration Number |
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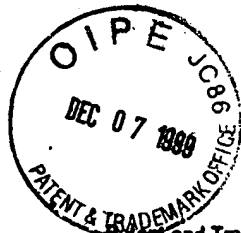
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of THIRD Inventor:

☐ A petition has been filed for this unsigned inventor

| | | | | | |
|--|--------------------|-------|---------|------------------------|------|
| Given Name (first and middle (if any)) | | | | Family Name or Surname | |
| Vladimir Andrei | | | | Koulchin | |
| Inventor's Signature | <i>V. Koulchin</i> | | | | Date |
| Residence: City | | State | Country | Citizenship | |
| Portland | | Maine | U.S.A. | Russia | |
| Post Office Address | | | | | |
| 340 Eastern Prom., #224 | | | | | |
| Post Office Address | | | | | |
| City | | State | Country | ZIP | |
| Portland | | Maine | U.S.A. | 04101 | |

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| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | Attorney Docket Number | | | |
| | 4th Named Inventor | Elena Valentin Molokova | | |
| | COMPLETE IF KNOWN | | | |
| | Application Number | 09/397,110 | | |
| | Filing Date | Sept. 16, 1999 | | |
| | Group Art Unit | | | |
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Name of 4th Inventor:

☐ A petition has been filed for this unsigned inventor

| Given Name (first and middle [if any]) | Family Name or Surname |
|--|------------------------|
| Elena Valentin | Molokova |

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|----------------------|-------------------------|-------|-------|---------|--------|-------------|--------|
| Inventor's Signature | <i>Molokova</i> | | | | Date | 11/15/99 | |
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☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto